PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correcte maintenance fee notificat	d below or directed oth	erwise in Block 1, by (a	n) specifying a new corres	pondence address;	and/or	(b) indicating a separ	ate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
7590 06/05/2009 Striker Striker & Stenby 103 East Neck Road Huntington, NY 11743				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
							(Depositor's name)
							(Signature)
							(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/520,792 FITLE OF INVENTION	01/10/2005 POWERED JIGSAW N	MACHINE	Aldo Di Nicolantonio			3165	3246
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0		\$1810	09/08/2009
EXAMINER		ART UNIT	CLASS-SUBCLASS				
LEE, LAURA MICHELLE		3724	030-392000	,			
. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON			(1) the names of up to or agents OR, alternative (2) the name of a single registered attorney or a 2 registered patent attored listed, no name will be	ne of a single firm (having as a member a attorney or agent) and the names of up to 1 patent attorneys or agents. If no name is ame will be printed.			
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been fil recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Robert Bosch GmbH Stuttgart, Germany							cument has been filed for
Please check the appropri	ate assignee category or	categories (will not be pr	rinted on the patent):	Individual VI Co	rporati	on or other private gro	ap entity Government
ta The following fee(s) a Lissue Fee Publication Fee (N Advance Order - #	o small entity discount p	D. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).					
a. Applicant claim	tus (from status indicated s SMALL ENTITY statu	is. See 37 CFR 1.27.	☐ b. Applicant is no lon				
nterest as shown by the	ecords of the United Sta	tes Patent and Trademark	Office.	no appricant, a regis		amornoy or agont, or the	c acception of other party in
Authorized Signature		1 6		Date 08/2	6/2	2009	
Typed or printed name	Michael	J. Striker		Registration N	o	27233	
This collection of inform an application. Confident submitting the completed this form and/or suggestimes.	ation is required by 37 C tiality is governed by 35 I application form to the ons for reducing this bu	FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the	on is required to obtain or 1.14. This collection is estable the individual of the i	retain a benefit by the timated to take 12 ryidual case. Any coer, U.S. Patent and	ne publ ninutes mment Traden	lic which is to file (and is to complete, including its on the amount of tin nark Office, U.S. Depa	by the USPTO to process) g gathering, preparing, and ne you require to complete rtment of Commerce, P.O.

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.